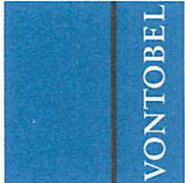




United States Bankruptcy Court  
Southern District of New York  
One Bowling Green  
New York, NY 10004-1408  
United States



Zurich, May 11, 2015/VBFRG  
Telephone 0041 58 283 50 56  
Telefax 0041 58 283 51 60  
roger.fivat@vontobel.ch

- ☐ as discussed
- ☐ for your information
- ☐ for your records
- ☐ please return
- ☐ please call
- ☐ forward to

- ☒ please process
- ☐ please comment
- ☐ please sign
- ☐ returned with thanks
- ☐ please clarify
- ☐

Please note:

Enlosed please find one form "Evidence of Transfer of Claim".

Please note, that the mentioned Lehman Products are deposited new in our bank.

Our claim number: 67373

If you have any questions, don't hesitate to contact me.

Yours sincerely,

Bank Vontobel AG

Roger Fivat

Page 2/2, May 11, 2015

United States District Court  
Southern District of New York  
New York, New York  
May 11, 2015  
Honorable Judge

Dear Judge:

Enclosed are the documents  
that I have prepared for  
your review.

I am sure that you will find  
the information helpful.

I am sure that you will find  
the information helpful.

Very truly yours,  
[Signature]

Form 210A (10/06)



# United States Bankruptcy Court

Southern District Of New York

In re Lehman Brothers Holdings Inc., et al., Debtors,

Case No. 08-13555 (JMP)

## TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee hereby gives evidence, attached hereto, and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice.

Bank Vontobel AG, Zurich / Switzerland

Name of Transferee

Name and Address where notices  
to transferee should be sent:

Bank Vontobel AG  
Gotthardstrasse 43  
Corporate Actions  
Postfach  
CH-8022 Zurich / Switzerland

Phone: 0041 58 283 50 56

Last Four Digits of Acct #: \_\_\_\_\_

UBS AG, Zurich / Switzerland

Name of Transferor

Court Claim # (if known): 59233

Date Claim Filed: not known

Amount of Claim: to be determined

Portion of Claim Transferred (see

Schedule I): Noninal CHF 28'000.00

Phone: \_\_\_\_\_

Last Four Digits of Acct. #: \_\_\_\_\_

Name and Address where transferee  
payments should be sent (if different  
from above):

Phone: \_\_\_\_\_

Last Four Digits of Acct #: \_\_\_\_\_

I declare under penalty of perjury that the information provided in this notice is true and correct to the best of my knowledge and belief.

By: 

Transferee/Transferee's Agent

Date: May 11, 2015

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 & 3571.*

Bank Vontobel AG  
Gotthardstrasse 43  
CH-8022 Zürich